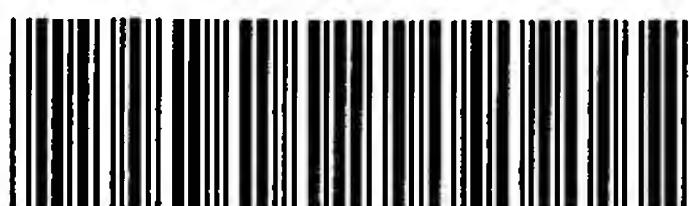


Index of Claims

Application No.

10/048,229

Applicant(s)

HEROLD ET AL.

Examiner

Art Unit

Hector M Reyes

1625

<input checked="" type="checkbox"/>	Rejected
<input type="checkbox"/>	Allowed

<input type="checkbox"/>	(Through numeral) Cancelled
<input type="checkbox"/>	Restricted

<input type="checkbox"/>	Non-Elected
<input type="checkbox"/>	Interference

<input type="checkbox"/>	Appeal
<input type="checkbox"/>	Objected

Claim	Date		Claim	Date		Claim	Date	
Final	Original		Final	Original		Final	Original	
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3			53			103		
4			54			104		
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